## Case 18-07711 Doc 1 Filed 03/16/18 Entered 03/16/18 14:29:59 Desc Main Document Page 1 of 66

| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | ☐ Chapter 7                   |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ■ Chapter 13                  | ☐ Check if this an amended filing |

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par   | t 1: Identify Yourself  |  |   |   |
|---|---|--|---|---|
|   |   | About Debtor 1:                          |   | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name  |  |   |   |
| Write the name that is on your government-issued picture identification (for example, your driver's license or passport). |   | Susan First name Elizabeth               | _ | First name                                    |
|   | neerise or passport).   | Middle name                              |   | Middle name                                   |
|   | Bring your picture  | Thompson                                 |   |   |
|   | identification to your meeting with the trustee.  | Last name and Suffix (Sr., Jr., II, III) | _ | Last name and Suffix (Sr., Jr., II, III)      |
|   |   |  |   |   |
| 2.  | All other names you have used in the last 8 years   |  |   |   |
|   | Include your married or maiden names.   |  |   |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-9760                              |   |   |

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Debtor 1 Susan Elizabeth Thompson

Case number (if known)

|  |   | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |  |
|--|---|--|--|--|--|--|
| 4. Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years |   | ■ I have not used any business name or EINs.   | ☐ I have not used any business name or EINs.   |  |  |  |
|  | Include trade names and doing business as names   | Business name(s)   | Business name(s)   |  |  |  |
|  |   | EINs   | EINs   |  |  |  |
| 5.   | Where you live  |  | If Debtor 2 lives at a different address:  |  |  |  |
|  |   | 17947 Oakwood Avenue<br>Lansing, IL 60438  |  |  |  |  |
|  |   | Number, Street, City, State & ZIP Code   | Number, Street, City, State & ZIP Code   |  |  |  |
| County   |   | County County  | County   |  |  |  |
|  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. |  | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |  |  |  |
|  |   | Number, P.O. Box, Street, City, State & ZIP Code   | Number, P.O. Box, Street, City, State & ZIP Code   |  |  |  |
| 6.   | Why you are choosing this district to file for  | Check one:   | Check one:   |  |  |  |
|  | bankruptcy  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |  |  |  |
|  |   | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |  |  |  |
|  |   |  |  |  |  |  |

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Debtor 1 Susan Elizabeth Thompson

Case number (if known)

| ⊃ar        | t 2: Tell the Court About   | Your B  | ankruptcy Ca                     | ise                                    |   |  |        |
|------------|---|---|----------------------------------|--|---|--|--------|
| 7.         | The chapter of the Bankruptcy Code you are  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |                                  |  |   |  |        |
|            | choosing to file under  | □ C   | hapter 7                         |  |   |  |        |
|            |   | □ C   | hapter 11                        |  |   |  |        |
|            |   | □ с   | hapter 12                        |  |   |  |        |
|            |   | ■ C   | hapter 13                        |  |   |  |        |
| 3.         | How you will pay the fee  | •   | about how yo                     | ou may pay. Typ<br>attorney is sub     | pically, if you are paying the fee                                    | eck with the clerk's office in your local court for more de<br>yourself, you may pay with cash, cashier's check, or m<br>half, your attorney may pay with a credit card or check   | oney   |
|            |   |   |                                  |  | tallments. If you choose this op                                      | tion, sign and attach the Application for Individuals to I   | Pay    |
|            |   |   | but is not req<br>applies to you | uired to, waive<br>ur family size ar   | your fee, and may do so only if y<br>nd you are unable to pay the fee | on only if you are filing for Chapter 7. By law, a judge rour income is less than 150% of the official poverty lin in installments). If you choose this option, you must fil ficial Form 103B) and file it with your petition.   | e that |
| <b>)</b> . | Have you filed for bankruptcy within the  | ■ No  |                                  |  |   |  |        |
|            | last 8 years?   | ☐ Ye  |                                  |  | NA/Is a co  | Occasional de la constantina della constantina d |        |
|            |   |   | District                         |  | When  | Case number  |        |
|            |   |   | District                         |  | When  | Case number  |        |
|            |   |   | District                         |  | When  | Case number  |        |
| 10.        | Are any bankruptcy cases pending or being   | ■ No  | )                                |  |   |  |        |
|            | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ☐ Ye  | es.                              |  |   |  |        |
|            |   |   | Debtor                           |  |   | Relationship to you  |        |
|            |   |   | District                         |  | When  | Case number, if known  |        |
|            |   |   | Debtor                           |  |   | Relationship to you  |        |
|            |   |   | District                         |  | When  | Case number, if known  |        |
| 11.        | Do you rent your residence?   | ■ No  | Go to I                          | ine 12.                                |   |  |        |
|            | residence:  | □Ye   | es. Has yo                       | our landlord obta                      | ained an eviction judgment agai                                       | nst you?   |        |
|            |   |   |                                  | No. Go to line                         | 12.   |  |        |
|            |   |   |                                  | Yes. Fill out <i>In</i> this bankruptc |   | n Judgment Against You (Form 101A) and file it as par  | t of   |

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Debtor 1 Susan Elizabeth Thompson

Case number (if known)

| Par  | t 3: Report About Any Bu  | sinesses | You Own           | as a Sole Proprie  | tor   |
|--|---|----------|-------------------|--|---|
| 12.  | Are you a sole proprietor of any full- or part-time business?   | ■ No.    |                   |  |   |
|  |   | ☐ Yes.   | Name              | and location of bus  | niness  |
|  | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |          | Name              |  |   |
|  | If you have more than one sole proprietorship, use a  |          | te & ZIP Code     |  |   |
|  | separate sheet and attach it to this petition.  |          | Check             | the appropriate bo   | x to describe your business:  |
|  |   |          |                   | Health Care Busin  | ness (as defined in 11 U.S.C. § 101(27A))   |
|  |   |          |                   | Single Asset Real  | Estate (as defined in 11 U.S.C. § 101(51B))   |
| Stockbroker (as defined in 11 U.S.C. § 101(53A))   |   |          |                   | efined in 11 U.S.C. § 101(53A))  |   |
|  |   |          |                   | Commodity Broke  | er (as defined in 11 U.S.C. § 101(6))   |
|  |   |          |                   | None of the above  | e   |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business  If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent operations, cash-flow statement, and federal income tax return or if any of these documents do not in 11 U.S.C. 1116(1)(B). |   |          |                   | a small business debtor, you must attach your most recent balance sheet, statement of  |   |
|  | debtor?  For a definition of small  | ■ No.    | I am n            | ot filing under Char   | oter 11.  |
|  | business debtor, see 11 U.S.C. § 101(51D).  | □ No.    | I am fil<br>Code. | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |   |
|  |   | ☐ Yes.   | I am fil          | ling under Chapter   | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Par  | t 4: Report if You Own or   | Have Any | Hazardo           | us Property or An  | y Property That Needs Immediate Attention   |
| 14.  | Do you own or have any  | ■ No.    |                   |  |   |
|  | property that poses or is<br>alleged to pose a threat<br>of imminent and  | ☐ Yes.   | What is t         | he hazard?   |   |
|  | identifiable hazard to<br>public health or safety?<br>Or do you own any   |          | If immedi         | ate attention is   |   |
|  | property that needs immediate attention?  |          |                   | why is it needed?  |   |
|  | For example, do you own perishable goods, or livestock that must be fed, V or a building that needs urgent repairs?   |          | Where is          | the property?  |   |
|  |   |          |                   |  | Number, Street, City, State & Zip Code  |

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Debtor 1 Susan Elizabeth Thompson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 66 Case number (if known) Debtor 1 Susan Elizabeth Thompson Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000** □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Susan Elizabeth Thompson Signature of Debtor 2 Susan Elizabeth Thompson Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on

March 16, 2018

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Debtor 1 Susan Elizabeth Thompson

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David Gallagher                    | Date N        | March 16, 2018            |
|--|---------------|---------------------------|
| Signature of Attorney for Debtor       | N             | MM / DD / YYYY            |
|  |               |                           |
| David Gallagher                        |               |                           |
| Printed name                           |               |                           |
| Upright Law LLC                        |               |                           |
| Firm name                              |               |                           |
| 79 West Monroe                         |               |                           |
| Fifith Floor                           |               |                           |
| Chicago, IL 60603                      |               |                           |
| Number, Street, City, State & ZIP Code |               |                           |
| Contact phone <b>312-546-4264</b>      | Email address | dgallagher@uprightlaw.com |
| 6295024 IL                             |               |                           |
| Day number 9 Ctate                     |               | =                         |

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|                         | Docum                                 | TIL FAUE O UI UU  |   |
|-------------------------|---------------------------------------|---|---|
| nation to identify your | case:                                 |   |   |
| Susan Elizabeth         | Thompson                              |   |   |
| First Name              | Middle Name                           | Last Name   |   |
|                         |                                       |   |   |
| First Name              | Middle Name                           | Last Name   |   |
| nkruptcy Court for the: | NORTHERN DISTRICT                     | OF ILLINOIS   |   |
|                         |                                       |   | ☐ Check if this is ar amended filing  |
|                         |                                       |   |   |
|                         | Susan Elizabeth First Name First Name | Susan Elizabeth Thompson First Name Middle Name  First Name Middle Name | Susan Elizabeth Thompson First Name Middle Name Last Name  First Name Middle Name Last Name |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| D-  | Ouron of the Many Assets  |             |                           |
|-----|---|-------------|---------------------------|
| Pai | t 1: Summarize Your Assets  | Your a      | assets<br>of what you own |
| 1.  | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 0.00                      |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$          | 35,219.59                 |
|     | 1c. Copy line 63, Total of all property on Schedule A/B   | \$          | 35,219.59                 |
| Par | t 2: Summarize Your Liabilities   |             |                           |
|     |   |             | iabilities<br>nt you owe  |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D                  | \$          | 27,320.00                 |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$          | 0.00                      |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$          | 113,929.00                |
|     | Your total liabilities  | \$          | 141,249.00                |
| Par | t 3: Summarize Your Income and Expenses   |             |                           |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$          | 1,917.11                  |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$          | 1,572.00                  |
| Par | t 4: Answer These Questions for Administrative and Statistical Records  |             |                           |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                                      | ur other sc | hedules.                  |
| 7.  | ■ Yes What kind of debt do you have?  |             |                           |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a personal  | l, family, or             |

the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

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Debtor 1 Susan Elizabeth Thompson

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,157.11 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

Case 18-07711 Doc 1 Filed 03/16/18 Entered 03/16/18 14:29:59 Desc Main Document Page 10 of 66 Fill in this information to identify your case and this filing: Debtor 1 Susan Elizabeth Thompson Last Name First Name Middle Name Debtor 2 First Name Middle Name (Spouse, if filing) Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet 3 1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Avalanche** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2004 Debtor 2 only Current value of the Current value of the 280.000 entire property? Approximate mileage: portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another Value According to NADA \$1,900.00 \$1,900.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Chevrolet Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D:

Camaro Model: Debtor 1 only Creditors Who Have Claims Secured by Property. 2010 Year: Debtor 2 only Current value of the 68,000 Approximate mileage: entire property? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another Value According to KBB \$8,918.00 ☐ Check if this is community property

(see instructions)

Official Form 106A/B Schedule A/B: Property page 1

Current value of the

\$8,918.00

portion you own?

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Case number (if known) Document Debtor 1 Susan Elizabeth Thompson 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No Yes Make: Forrest River Who has an interest in the property? Check one Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Sunseeker Class C ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Model: 2007 Year: Debtor 2 only Current value of the Current value of the ☐ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$21,000.00 \$21,000.00 Value According to NADA ☐ Check if this is community property (see instructions) **Debtor is Surrendering** 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$31,818.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$1,700.00 Houeshold Goods and Furnishings 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... **Used Electronics** \$400.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No

#### 9. Equipment for sports and hobbies

☐ Yes. Describe.....

#### 10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

■ No

☐ Yes. Describe.....

#### 11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

■ Yes. Describe.....

Document Page 12 of 66 Case number (if known) Debtor 1 Susan Elizabeth Thompson **Necessary Wearing Apparel** \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$100.00 Costume Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No  $\hfill \square$  Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,700.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash on hand at time of \$0.00 filing 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **American Community Bank Account** \$496.90 Checking Illian Indoor Billboards

Official Form 106A/B Schedule A/B: Property page 3

First National Bank of Illinois Bank Account

First National Bank of Illinois Bank Account

17 2

Savings

17.3. Checking

\$5.00

\$0.00

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Case number (if known) Debtor 1 Susan Elizabeth Thompson 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No Institution or issuer name: Yes..... Two Share of Fidelity Investments \$199.69 Stock price as of 3/5/18 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses □ No Yes. Give specific information about them... Illiana Indoor Billboards \$0.00 **Francise** 

Money or property owed to you?

Current value of the portion you own?

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Case number (if known) Debtor 1 Susan Elizabeth Thompson Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **Term Life Insurance with Securian Financial Group** \$0.00 No cash value 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$701.59 for Part 4. Write that number here...... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.

☐ Yes. Go to line 38.

Case 18-07711 Doc 1 Filed 03/16/18 Entered 03/16/18 14:29:59 Desc Main Document Page 15 of 66 Case number (if known) Debtor 1 Susan Elizabeth Thompson Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$31,818.00 57. Part 3: Total personal and household items, line 15 \$2,700.00 Part 4: Total financial assets, line 36 \$701.59 59. Part 5: Total business-related property, line 45 \$0.00

\$0.00

\$0.00

Copy personal property total

\$35,219.59

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 6: Total farm- and fishing-related property, line 52

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

60.

61.

\$35,219.59

\$35,219.59

Official Form 106A/B Schedule A/B: Property page 6

Page 16 of 66 Document Fill in this information to identify your case: Debtor 1 Susan Elizabeth Thompson Middle Name Last Name First Name Debtor 2 First Name Middle Name (Spouse if, filing) Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amo  | unt of the exemption you claim                                  | Specific laws that allow exemption |
|--|--------------------------------------|------|---|------------------------------------|
|  | Copy the value from<br>Schedule A/B  | Chec | ck only one box for each exemption.                             |                                    |
| 2004 Chevrolet Avalanche 280,000 miles   | \$1,900.00                           |      | \$1,900.00  | 735 ILCS 5/12-1001(b)              |
| Value According to NADA Line from Schedule A/B: 3.1                                    |                                      |      | 100% of fair market value, up to any applicable statutory limit |                                    |
| 2010 Chevrolet Camaro 68,000 miles<br>Value According to KBB                           | \$8,918.00                           |      | \$2,400.00  | 735 ILCS 5/12-1001(c)              |
| Line from Schedule A/B: 3.2  |                                      |      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Houeshold Goods and Furnishings Line from Schedule A/B: 6.1                            | \$1,700.00                           |      | \$1,700.00  | 735 ILCS 5/12-1001(b)              |
| Elle Holli Geriedale A/B. G.1  |                                      |      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Used Electronics Line from Schedule A/B: 7.1   | \$400.00                             |      | \$200.00  | 735 ILCS 5/12-1001(b)              |
| Life from Schedule AVD. 1.1  |                                      |      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Necessary Wearing Apparel Line from Schedule A/B: 11.1                                 | \$500.00                             |      | \$500.00  | 735 ILCS 5/12-1001(a)              |
| Line from Sofiedule A/D. 1111  |                                      |      | 100% of fair market value, up to any applicable statutory limit |                                    |

Document Page 17 of 66 Debtor 1 Susan Elizabeth Thompson Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Costume Jewelry** 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Checking: American Community** 735 ILCS 5/12-1001(b) \$100.00 \$496.90 **Bank Account** 100% of fair market value, up to Illian Indoor Billboards any applicable statutory limit t.)

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Desc Main

|    | Line | e from Schedule A/B: 17.1   |
|----|------|---|
| 3. |      | e you claiming a homestead exemption of more than \$160,375?  bject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustmen |
|    |      | No  |
|    |      | Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  |
|    |      | □ No  |
|    |      | ☐ Yes   |

Filed 03/16/18

Case 18-07711

Doc 1

| Case 1                                | L8-07711             |   | intered      | 03/16/18 14:2  | 29:59 Desc M                                 | 1ain                        |
|---------------------------------------|----------------------|---|--------------|--|--|-----------------------------|
| Fill in this information              | n to identify you    |   | 00 10        |  |  |                             |
| Debtor 1 Su                           | ısan Elizabeth       | Thompson  |              |  |  |                             |
|                                       | st Name              | •   | Name         |  |  |                             |
| Debtor 2<br>(Spouse if, filing) Firs  | st Name              | Middle Name Last  | Name         |  |  |                             |
| United States Bankrupt                | tcy Court for the:   | NORTHERN DISTRICT OF ILLINOI  | S            |  |  |                             |
| Case number                           |                      |   |              |  |  | if this is an<br>ded filing |
| Official Form 10<br>Schedule D: (     |                      | Who Have Claims Sec   | cured        | by Property  | y  | 12/15                       |
|                                       |                      | f two married people are filing together, bo<br>out, number the entries, and attach it to this    |              |  |  |                             |
| . Do any creditors have               | claims secured by    | your property?  |              |  |  |                             |
| ☐ No. Check this b                    | oox and submit th    | is form to the court with your other sche   | dules. You   | have nothing else to                                   | o report on this form.                       |                             |
| Yes. Fill in all of                   | the information b    | pelow.  |              |  |  |                             |
| Part 1: List All Sec                  | ured Claims          |   |              |  |  |                             |
|                                       |                      | nore than one secured claim, list the creditor s  | operately    | Column A   | Column B                                     | Column C                    |
| for each claim. If more that          | an one creditor has  | a particular claim, list the other creditors in Pa<br>all order according to the creditor's name. |              | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any    |
| 2.1 Huntington Na                     | tl Bk                | Describe the property that secures the cla  | aim:         | \$27,320.00  | \$21,000.00                                  | \$6,320.00                  |
| Creditor's Name                       |                      | 2007 Forrest River Sunseeker Cl<br>C<br>Value According to NADA                                   | ass          |  |  |                             |
|                                       |                      |   |              |  |  |                             |
|                                       |                      | Debtor is Surrendering  As of the date you file, the claim is: Check                              | all that     |  |  |                             |
| Po Box 1558                           | 10010                | apply.  | all triat    |  |  |                             |
| Columbus, OH                          |                      | Contingent  |              |  |  |                             |
| Number, Street, City, S               | tate & Zip Code      | Unliquidated  |              |  |  |                             |
| Who owes the debt? C                  | heck one             | ☐ Disputed  Nature of lien. Check all that apply.   |              |  |  |                             |
| _                                     | neok one.            | _   |              | 1  |  |                             |
| ■ Debtor 1 only □ Debtor 2 only       |                      | <ul> <li>An agreement you made (such as mortga<br/>car loan)</li> </ul>                           | age or secur | eu   |  |                             |
| Debtor 1 and Debtor 2                 | only                 | ☐ Statutory lien (such as tax lien, mechanic  | 's lion)     |  |  |                             |
| At least one of the deb               | -                    | ☐ Statutory lien (such as tax lien, mechanic ☐ Judgment lien from a lawsuit                       | 5 IIUII)     |  |  |                             |
| Check if this claim re community debt |                      | Other (including a right to offset)   |              |  |  |                             |
|                                       | Opened<br>01/15 Last |   |              |  |  |                             |

Add the dollar value of your entries in Column A on this page. Write that number here: \$27,320.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$27,320.00

Last 4 digits of account number

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

5618

Date debt was incurred 2/13/18

Case 18-07711 Doc 1 Filed 03/16/18 Entered 03/16/18 14:29:59 Desc Main Page 19 of 66 Document Fill in this information to identify your case: Debtor 1 Susan Elizabeth Thompson Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 **Bank Of America** Last 4 digits of account number 1178 \$0.00 Nonpriority Creditor's Name Opened 10/07 Last Active Nc4-105-03-14 Po Box 26012 When was the debt incurred? 1/22/10 Greensboro, NC 27410 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Best Case Bankruptcy

■ Other. Specify Check Credit Or Line Of Credit

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Page 20 of 66 Case number (if know) Document Debtor 1 Susan Elizabeth Thompson

| 4.2 | Cap1/dbarn   | Last 4 digits of account number                                 | 8187  | \$0.00      |
|-----|--|---|---|-------------|
|     | Nonpriority Creditor's Name Capital One Retail Srvs/Attn: Bankruptcy Po Box 30258              | When was the debt incurred?                                     | Opened 09/07 Last Active 11/10/16             |             |
|     | Salt Lake City, UT 84130  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                              | is: Check all that apply                      |             |
|     | ■ Debtor 1 only  | ☐ Contingent  |   |             |
|     | Debtor 2 only  | ☐ Unliquidated  |   |             |
|     | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |             |
|     | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                   | d claim:                                      |             |
|     | ☐ Check if this claim is for a community   | ☐ Student loans   |   |             |
|     | debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims      | aration agreement or divorce that you did not |             |
|     | ■ No   | Debts to pension or profit-sharing                              | g plans, and other similar debts              |             |
|     | Yes  | Other. Specify Charge Acc                                       | count   |             |
| 4.3 | Capital One  | Last 4 digits of account number                                 | 3710  | \$12,729.00 |
|     | Nonpriority Creditor's Name Attn: General Correspondence/Bankruptcy Po Box 30285               | When was the debt incurred?                                     | Opened 09/01 Last Active 1/18/18              |             |
|     | Salt Lake City, UT 84130  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                              | is: Check all that apply                      |             |
|     | ■ Debtor 1 only  | ☐ Contingent  |   |             |
|     | Debtor 2 only  | ☐ Unliquidated  |   |             |
|     | Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |             |
|     | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                   | d claim:                                      |             |
|     | ☐ Check if this claim is for a community   | ☐ Student loans   |   |             |
|     | debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims      | aration agreement or divorce that you did not |             |
|     | ■ No   | Debts to pension or profit-sharing                              | g plans, and other similar debts              |             |
|     | Yes  | Other. Specify Credit Card                                      | <u> </u>                                      |             |
| 4.4 | Capital One  | Last 4 digits of account number                                 | 5582  | \$6,478.00  |
|     | Nonpriority Creditor's Name Attn: General Correspondence/Bankruptcy Po Box 30285               | When was the debt incurred?                                     | Opened 05/16 Last Active 1/25/18              |             |
|     | Salt Lake City, UT 84130  Number Street City State Zlp Code                                    | As of the date you file, the claim                              | is: Check all that apply                      |             |
|     | Who incurred the debt? Check one.  |   |   |             |
|     | ■ Debtor 1 only  | ☐ Contingent  |   |             |
|     | Debtor 2 only  | ☐ Unliquidated  |   |             |
|     | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |             |
|     | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                   | d claim:                                      |             |
|     | ☐ Check if this claim is for a community debt  |   | aration agreement or divorce that you did not |             |
|     | Is the claim subject to offset?  | report as priority claims                                       |   |             |
|     | ■ No   | ☐ Debts to pension or profit-sharin ☐ Other. Specify Charge Acc |   |             |
|     | Yes  | count   |   |             |

Document Page 21 of 66 Debtor 1 Susan Elizabeth Thompson Case number (if know) 4.5 Capital One Last 4 digits of account number 5848 \$0.00 Nonpriority Creditor's Name Attn: General Opened 03/07 Last Active Correspondence/Bankruptcy When was the debt incurred? 4/13/12 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.6 **Chase Card Services** Last 4 digits of account number 6603 \$17,115.00 Nonpriority Creditor's Name Opened 07/14 Last Active Attn: Correspondence Dept Po Box 15298 When was the debt incurred? 1/31/18 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.7 \$13,180.00 **Chase Card Services** Last 4 digits of account number 6410 Nonpriority Creditor's Name Opened 06/98 Last Active Po Box 15298 When was the debt incurred? 1/22/18 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated

☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

Document Page 22 of 66 Debtor 1 Susan Elizabeth Thompson Case number (if know) 4.8 Citibank / Sears Last 4 digits of account number 8795 \$0.00 Nonpriority Creditor's Name Citicorp Credit Services/Attn: Opened 1/01/93 Last Active 10/29/08 Centraliz When was the debt incurred? Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.9 Citibank/Best Buy Last 4 digits of account number 8414 \$0.00 Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Opened 12/17 Last Active **Bankrup** When was the debt incurred? 1/30/18 Po Box 790040 St. Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Charge Account** Other. Specify 4.1 Citicards Cbna 2304 \$2.898.00 Last 4 digits of account number Nonpriority Creditor's Name Citicorp Credit Svc/Centralized Opened 12/13 Last Active **Bankrupt** When was the debt incurred? 2/06/18 Po Box 790040 Saint Louis, MO 63179 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Credit Card

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Document Page 23 of 66 Debtor 1 Susan Elizabeth Thompson Case number (if know) 4.1 \$0.00 Comenity Bank/Avenue 9112 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/12 Last Active Po Box 182125 When was the debt incurred? 6/11/13 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 Comenity Bank/Victoria Secret 9870 \$152.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 04/08 Last Active Po Box 182125 When was the debt incurred? 12/05/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 **Discover Personal Loan** 6677 \$34,682.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/16 Last Active Po Box 30954 When was the debt incurred? 12/20/17 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

■ No

☐ Yes

■ Other. Specify Unsecured

report as priority claims

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

Document Page 24 of 66 Debtor 1 Susan Elizabeth Thompson Case number (if know) 4.1 \$0.00 **Huntington Bank** 3707 Last 4 digits of account number 4 Nonpriority Creditor's Name Attn: Bankruptcy Opened 1/31/15 Last Active 2/06/17 P.O. Box 182519 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Recreational ☐ Yes 4.1 Kohls/Capital One 6098 \$0.00 Last 4 digits of account number 5 Nonpriority Creditor's Name **Kohls Credit** Opened 1/14/06 Last Active When was the debt incurred? Po Box 3043 11/01/10 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Prosper Marketplace Inc 4653 \$0.00 6 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/15 Last Active Po Box 396081 When was the debt incurred? 8/09/16 San Francisco, CA 94139 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not

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■ No

☐ Yes

■ Other. Specify Unsecured

report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

Document Page 25 of 66 Debtor 1 Susan Elizabeth Thompson Case number (if know) 4.1 Syncb/PLCC \$0.00 1196 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 3/07/10 Last Active Po Box 965060 When was the debt incurred? 6/16/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Syncb/zulily 4592 \$245.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 09/17 Last Active Po Box 965017 When was the debt incurred? 2/23/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 \$290.00 Synchrony Bank 7690 Last 4 digits of account number 9 Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/17 Last Active Po Box 965060 When was the debt incurred? 2/16/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

■ No

☐ Yes

■ Other. Specify Credit Card

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Document Page 26 of 66 Debtor 1 Susan Elizabeth Thompson Case number (if know) 4.2 \$0.00 Synchrony Bank 4841 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/12 Last Active Po Box 965060 When was the debt incurred? 1/05/16 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 Synchrony Bank/ HH Gregg 0838 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 02/04 Last Active Attn: Bankruptcy Po Box 965060 When was the debt incurred? 3/16/07 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 Synchrony Bank/ JC Penneys 6849 \$130.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/07 Last Active Attn: Bankruptcy Po Box 965060 When was the debt incurred? 2/26/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No

Official Form 106 E/F

☐ Yes

■ Other. Specify Charge Account

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Official Form 106 E/F

debt

■ No

☐ Yes

■ Other. Specify Credit Card

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

| Debtor   | Susan Elizabeth Thompson   | Document Page 28   | 8 of 66<br>Case number (if know)             |             |
|----------|--|--|--|-------------|
| 4.2<br>6 | Synchrony Bank/Sams  | Last 4 digits of account number                                | 0596   | \$649.00    |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 | When was the debt incurred?                                    | Opened 08/15 Last Active 1/31/18             |             |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.          | As of the date you file, the claim i                           | s: Check all that apply                      |             |
|          | Debtor 1 only  | ☐ Contingent   |  |             |
|          | Debtor 2 only  | ☐ Unliquidated   |  |             |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |             |
|          | ☐ At least one of the debtors and another                                    | Type of NONPRIORITY unsecured                                  | d claim:                                     |             |
|          | ☐ Check if this claim is for a community                                     | ☐ Student loans  |  |             |
|          | debt<br>Is the claim subject to offset?                                      | ☐ Obligations arising out of a sepa report as priority claims  | ration agreement or divorce that you did not |             |
|          | ■ No   | Debts to pension or profit-sharing                             | g plans, and other similar debts             |             |
|          | Yes  | Other. Specify Charge Acc                                      | count  |             |
| 4.2      | Synchrony Bank/Select Comfort  | Last 4 digits of account number                                | 1208   | \$0.00      |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 | When was the debt incurred?                                    | Opened 12/06 Last Active 9/10/07             |             |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.          | As of the date you file, the claim i                           | s: Check all that apply                      |             |
|          | Debtor 1 only  | ☐ Contingent   |  |             |
|          | Debtor 2 only  | ☐ Unliquidated   |  |             |
|          | ☐ Debtor 1 and Debtor 2 only   | □ Disputed   |  |             |
|          | ☐ At least one of the debtors and another                                    | Type of NONPRIORITY unsecured                                  | d claim:                                     |             |
|          | ☐ Check if this claim is for a community                                     | ☐ Student loans  |  |             |
|          | debt Is the claim subject to offset?   | Obligations arising out of a sepa report as priority claims    | ration agreement or divorce that you did not |             |
|          | ■ No   | Debts to pension or profit-sharin                              | g plans, and other similar debts             |             |
|          | Yes  | Other. Specify Charge Acc                                      | count  |             |
| 4.2      | US Bank/Rms CC   | Last 4 digits of account number                                | 7689   | \$18,828.00 |
|          | Nonpriority Creditor's Name  | _  |  |             |
|          | 4325 17th Ave S<br>Fargo, ND 58125   | When was the debt incurred?                                    | Opened 07/13 Last Active 2/05/18             |             |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.          | As of the date you file, the claim i                           | s: Check all that apply                      |             |
|          | Debtor 1 only  | ☐ Contingent   |  |             |
|          | Debtor 2 only  | ☐ Unliquidated   |  |             |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |             |
|          | ☐ At least one of the debtors and another                                    | Type of NONPRIORITY unsecured                                  |  |             |
|          | ☐ Check if this claim is for a community                                     | ☐ Student loans  |  |             |
|          | debt Is the claim subject to offset?   | Obligations arising out of a sepa<br>report as priority claims | ration agreement or divorce that you did not |             |

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

Other. Specify Credit Card

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

■ No

☐ Yes

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Susan Elizabeth Thompson

Case number (if know)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | Т  | otal Claim |
|--------------|-----|---|-----|----|------------|
|              | 6a. | Domestic support obligations  | 6a. | \$ | 0.00       |
| Total claims |     |   |     |    |            |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00       |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00       |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00       |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00       |
|              |     |   |     | 1  | otal Claim |
| Total        | 6f. | Student loans   | 6f. | \$ | 0.00       |
| claims       |     |   |     |    |            |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00       |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$ | 0.00       |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 113,929.00 |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 113,929.00 |

|                     |                          | D C C C C I I I C | 1 446 66 61 66 |                |
|---------------------|--------------------------|-------------------|----------------|----------------|
| Fill in this infor  | rmation to identify your | case:             |                |                |
| Debtor 1            | Susan Elizabeth          | Thompson          |                |                |
|                     | First Name               | Middle Name       | Last Name      |                |
| Debtor 2            |                          |                   |                |                |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name      |                |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS    |                |
| Case number         |                          |                   |                |                |
| (if known)          |                          |                   |                | ☐ Check if the |
|                     |                          |                   |                | amended        |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

2.1 Renters Warehouse 17947 Oakwood Avenue Lansing, IL 60438

State what the contract or lease is for \$700.00 a month residential lease

|                           | Case 18-07/11 L   | Doc 1 Filed 03/1<br>Docume                           |                         | 03/16/18 14:29                        | 159 Desc Main  |
|---------------------------|---|--|-------------------------|---------------------------------------|--|
| Fill in this              | information to identify your  |  | III Paue SI 0           | 1 00                                  |  |
| Debtor 1                  |   |  |                         |                                       |  |
| Debior 1                  | Susan Elizabeth First Name  | Middle Name  | Last Name               |                                       |  |
| Debtor 2                  |   |  |                         |                                       |  |
| (Spouse if, fili          | ng) First Name  | Middle Name  | Last Name               |                                       |  |
| United Sta                | ites Bankruptcy Court for the:                                      | NORTHERN DISTRICT                                    | OF ILLINOIS             |                                       |  |
| Case num                  | ber   |  |                         |                                       |  |
| (if known)                |   |  |                         |                                       | ☐ Check if this is an amended filing   |
| Officia                   | l Form 106H   |  |                         |                                       |  |
|                           | lule H: Your Cod  | ebtors   |                         |                                       | 12/15  |
| ill it out, a<br>our name |   | boxes on the left. Attach<br>. Answer every question | the Additional Page to  | o this page. On the to                | needed, copy the Additional Page,<br>p of any Additional Pages, write  |
| ■ No                      |   |  |                         |                                       |  |
| ☐ Yes                     | 5   |  |                         |                                       |  |
|                           | hin the last 8 years, have you<br>aa, California, Idaho, Louisiana, |  |                         |                                       |  |
| ■ No.                     | Go to line 3.   |  |                         |                                       |  |
| ☐ Yes                     | s. Did your spouse, former spou                                     | use, or legal equivalent live                        | with you at the time?   |                                       |  |
| in line<br>Form           | e 2 again as a codebtor only i                                      | f that person is a guaran                            | tor or cosigner. Make s | sure you have listed t                | ng with you. List the person shown<br>he creditor on Schedule D (Official<br>Schedule E/F, or Schedule G to fill |
|                           | Column 1: Your codebtor<br>Name, Number, Street, City, State and ZI | P Code   |                         | Column 2: The cr<br>Check all schedul | editor to whom you owe the debt es that apply:   |
| 3.1                       |   |  |                         | ☐ Schedule D, lir                     | ne   |
|                           | Name  |  |                         | □ Schedule E/F,                       | line   |
|                           |   |  |                         | ☐ Schedule G, lir                     | ne   |
|                           | Number Street   |  |                         | _                                     |  |
|                           | City  | State  | ZIP Code                |                                       |  |
| 2.0                       |   |  |                         | Coherentale D. P.                     |  |
| 3.2                       | Name  |  |                         | _ ☐ Schedule D, lir ☐ Schedule E/F,   |  |
|                           |   |  |                         | ☐ Schedule E/F,                       |  |

Street

State

Number

City

ZIP Code

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|             |   |  |   |              |       | ı  |                                |                                   |          |
|-------------|---|--|---|--------------|-------|--|--------------------------------|-----------------------------------|----------|
|             | in this information to identify you btor 1 Susan El   | ir case:<br>izabeth Thompson                               |   |              |       |  |                                |                                   |          |
|             | btor 2  ouse, if filing)  |  |   |              | _     |  |                                |                                   |          |
| Uni         | ited States Bankruptcy Court for  | the: NORTHERN DISTRIC                                      | CT OF ILLINOIS                                      |              |       |  |                                |                                   |          |
|             | se number<br>nown)  |  | -   |              |       | Check if this is  An amend  A supplem  13 income | ed filing<br>ent showir        | ng postpetition<br>ollowing date: |          |
| 0           | fficial Form 106I   |  |   |              |       | MM / DD/   | YYYY                           |                                   |          |
| S           | chedule I: Your Ir  | come   |   |              |       |  |                                |                                   | 12/1     |
| spo<br>atta | plying correct information. If youse. If you are separated and ich a separate sheet to this for the control of | your spouse is not filing w<br>m. On the top of any additi | ith you, do not inclu<br>ional pages, write yo      | ıde inforı   | mati  | on about your sp<br>I case number (if            | ouse. If m<br>known). <i>I</i> | ore space is<br>Answer every      | needed,  |
|             | information.  |  | Debtor 1  |              |       |  |                                | iling spouse                      |          |
|             | If you have more than one job<br>attach a separate page with<br>information about additional  | Employment status  | <ul><li>■ Employed</li><li>□ Not employed</li></ul> |              |       | ☐ Emp  | loyed<br>employed              |                                   |          |
|             | employers.  | Occupation   | Owner   |              |       |  |                                |                                   |          |
|             | Include part-time, seasonal, or self-employed work.   | Employer's name  | Illiana Billboard                                   | ds, LLC      |       |  |                                |                                   |          |
|             | Occupation may include stude or homemaker, if it applies.   | nt Employer's address                                      | 17947 Oakwood<br>Lansing, IL 604                    |              | ie    |  |                                |                                   |          |
|             |   | How long employed t  | there? 5 years                                      | 5            |       |  |                                |                                   |          |
| Pa          | rt 2: Give Details About  | Monthly Income   |   |              |       |  |                                |                                   |          |
|             | imate monthly income as of th use unless you are separated.   | e date you file this form. If                              | you have nothing to r                               | eport for    | any   | ine, write \$0 in the                            | e space. In                    | clude your no                     | n-filing |
|             | ou or your non-filing spouse have<br>re space, attach a separate shee   |  | ombine the informatio                               | on for all e | emplo | oyers for that pers                              | on on the l                    | ines below. If                    | you need |
|             |   |  |   |              |       | For Debtor 1                                     |                                | btor 2 or<br>ing spouse           |          |
| 2.          | List monthly gross wages, s deductions). If not paid month  |  |   | 2.           | \$    | 0.00   | . \$                           | N/A                               | -        |
| 3.          | Estimate and list monthly ov  | vertime pay.   |   | 3.           | +\$   | 0.00   | +\$                            | N/A                               | -<br>-   |
| 4.          | Calculate gross Income. Ad  | d line 2 + line 3.   |   | 4.           | \$    | 0.00   | \$                             | N/A                               |          |

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| Deb | tor 1               | Susan Elizabeth Thompson  | -                          | C              | Case                     | number (if known)                                  |                        |        |                                 |                  |
|-----|---------------------|---|----------------------------|----------------|--------------------------|--|------------------------|--------|---------------------------------|------------------|
|     |                     |   |                            |                | For                      | Debtor 1   |                        | Debtor |                                 |                  |
|     | Сор                 | y line 4 here   | 4.                         |                | \$                       | 0.00   | \$                     | 9      | N/A                             | <u> </u>         |
| 5.  | List                | all payroll deductions:   |                            |                |                          |  |                        |        |                                 |                  |
| ٥.  | 5a.                 | Tax, Medicare, and Social Security deductions   | 5a                         |                | \$                       | 0.00   | \$                     |        | N/A                             |                  |
|     | 5b.                 | Mandatory contributions for retirement plans  | 5b                         |                | <b>\$</b> _              | 0.00   | <b>\$</b> -            |        | N/A                             | _                |
|     | 5c.                 | Voluntary contributions for retirement plans  | 5c                         |                | <u>\$</u> -              | 0.00   | \$<br>-                |        | N/A                             | _                |
|     | 5d.                 | Required repayments of retirement fund loans  | 5d                         |                | <b>\$</b> _              | 0.00   | \$                     |        | N/A                             |                  |
|     | 5e.                 | Insurance   | 5e                         |                | <b>\$</b> -              | 0.00   | \$_                    |        | N/A                             |                  |
|     | 5f.                 | Domestic support obligations  | 5f.                        |                | ·<br>\$                  | 0.00   | \$                     |        | N/A                             | _                |
|     | 5g.                 | Union dues  | 5g                         | ١.             | \$                       | 0.00   | \$                     |        | N/A                             | _                |
|     | 5h.                 | Other deductions. Specify:  |                            |                | \$                       |  | + \$                   |        | N/A                             | _                |
| 6.  | Add                 | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | _<br>6.                    |                | \$                       | 0.00   | \$                     |        | N/A                             | _                |
| 7.  | Calc                | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.                         |                | \$                       | 0.00   | \$                     |        | N/A                             | _                |
| 8.  | 8b. 8c. 8d. 8e. 8f. | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Food Stamps  Pension or retirement income | 8a<br>8b<br>8c<br>8d<br>8e | ).<br>:.<br>!. | \$_<br>\$_<br>\$_<br>\$_ | 1,037.11<br>0.00<br>0.00<br>0.00<br>0.00<br>380.00 | \$_<br>\$_<br>\$<br>\$ |        | N/A<br>N/A<br>N/A<br>N/A<br>N/A |                  |
|     | og.<br>8h.          | Other monthly income. Specify: Side Jobs  | oy<br>8h                   | ,              | \$<br>_                  | 500.00   |                        |        | N/A<br>N/A                      | _                |
|     | 011.                | Olde CODS   |                            | ···            | <u> </u>                 | 300.00   | ·                      |        | 14/7                            |                  |
| 9.  | Add                 | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.                         | \$             |                          | 1,917.11   | \$_                    |        | N/                              | Α                |
| 10  | Calc                | culate monthly income. Add line 7 + line 9.   | 10.                        | Φ.             |                          | 1,917.11 + \$                                      |                        | N/A    | = \$                            | 1,917.11         |
| 10. |                     | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.                        | Ψ_             |                          | 1,917.11   |                        | IN/A   | -                               | 1,917.11         |
| 11. | Inclu<br>othe       | e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives.  Not include any amounts already included in lines 2-10 or amounts that are not a cify:  | depe                       |                |                          | •  |                        |        | ∍ J.<br>+\$                     | 0.00             |
| 12. |                     | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines  |                            |                |                          |  |                        | 12.    | \$                              | 1,917.11         |
| 13. | Do v                | ou expect an increase or decrease within the year after you file this form  | ?                          |                |                          |  |                        |        | Combi<br>month                  | ned<br>ly income |
|     |                     | No.   |                            |                |                          |  |                        |        |                                 |                  |
|     |                     | Ves Evolain:  |                            |                |                          |  |                        |        |                                 |                  |

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| Fill       | in this informa                 | tion to identify y                                   | our case:                |   |  | 1            |                   |                               |
|------------|---------------------------------|--|--------------------------|---|--|--------------|-------------------|-------------------------------|
|            | tor 1                           | Susan Elizal   |                          | mpson   |  | Che          | eck if this is:   |                               |
| Deb        | Debtor 2                        |  |                          |   |  |              | An amended filing | wing postpetition chapter     |
| (Spo       | ouse, if filing)                |  |                          |   |  |              | 13 expenses as of |                               |
| Unit       | ed States Bankr                 | ruptcy Court for the                                 | : NORTH                  | ERN DISTRICT OF ILLIN                                       | OIS                                    |              | MM / DD / YYYY    |                               |
|            | e number<br>nown)               |  |                          |   |  |              |                   |                               |
| Of         | fficial Fo                      | rm 106J  |                          |   |  |              |                   |                               |
|            |                                 | J: Your  | Exper                    | nses  |  |              |                   | 12/15                         |
| Be<br>info | as complete a                   | and accurate as                                      | s possible<br>eded, atta | . If two married people ar<br>ich another sheet to this     |  |              |                   |                               |
| Par        |                                 | ibe Your House                                       | ehold                    |   |  |              |                   |                               |
| 1.         | Is this a joir No. Go to        |  |                          |   |  |              |                   |                               |
|            |                                 |  | in a separ               | ate household?  |  |              |                   |                               |
|            | □ N                             |  | •                        |   |  |              |                   |                               |
|            | □ Y                             | es. Debtor 2 mu                                      | st file Offici           | al Form 106J-2, Expenses                                    | for Separate House                     | ehold of Del | otor 2.           |                               |
| 2.         | Do you have                     | e dependents?  | ■ No                     |   |  |              |                   |                               |
|            | Do not list Debtor 2.           | ebtor 1 and  | ☐ Yes.                   | Fill out this information for each dependent                | Dependent's relat<br>Debtor 1 or Debto |              | Dependent's age   | Does dependent live with you? |
|            | Do not state                    |  |                          |   |  |              |                   | □ No                          |
|            | dependents                      | names.   |                          |   |  |              |                   | □ Yes<br>□ No                 |
|            |                                 |  |                          |   |  |              |                   | ☐ Yes                         |
|            |                                 |  |                          |   |  |              |                   | □ No                          |
|            |                                 |  |                          |   |  |              |                   | ☐ Yes<br>☐ No                 |
|            |                                 |  |                          |   |  |              |                   | ☐ Yes                         |
| 3.         | expenses of                     | penses include<br>f people other t<br>d your depende | than 👝                   | No<br>Yes   |  |              |                   |                               |
| Par        | t 2: Estim                      | ate Your Ongoi                                       | ing Month                | ly Fynenses   |  |              |                   |                               |
| Est<br>exp | imate your ex                   | cpenses as of y                                      | our bankr                | uptcy filing date unless y<br>y is filed. If this is a supp |  |              |                   |                               |
| Incl       | lude expense                    | s paid for with                                      | non-cash                 | government assistance i                                     | f you know                             |              |                   |                               |
|            | value of such<br>ficial Form 10 |  | nd have ind              | cluded it on Schedule I: \                                  | our Income                             |              | Your exp          | enses                         |
| 4.         |                                 | or home owners and any rent for th                   |                          | ses for your residence. I<br>or lot.                        | nclude first mortgag                   | e<br>4.      | \$                | 700.00                        |
|            | If not includ                   | led in line 4:                                       |                          |   |  |              |                   |                               |
|            | 4a. Real e                      | estate taxes   |                          |   |  | 4a.          | \$                | 0.00                          |
|            | •                               | rty, homeowner'                                      |                          |   |  | 4b.          | ·                 | 0.00                          |
|            |                                 | maintenance, re<br>owner's associa                   |                          | upkeep expenses   |  | 4c.<br>4d.   | •                 | 0.00                          |
| 5.         |                                 |  |                          | our residence, such as ho                                   | me equity loans                        | 4d.<br>5.    | ·                 | 0.00                          |

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| Debtor 1        | Susan Elizabeth Thompson   | Case num     | ber (if known) |                         |
|-----------------|--|--------------|----------------|-------------------------|
| 6. <b>Utili</b> | ties:  |              |                |                         |
| 6a.             | Electricity, heat, natural gas   | 6a.          | \$             | 0.00                    |
| 6b.             | Water, sewer, garbage collection   | 6b.          |                | 25.00                   |
| 6c.             | Telephone, cell phone, Internet, satellite, and cable services                                 | 6c.          |                | 0.00                    |
| 6d.             | Other. Specify:  | 6d.          | · ·            | 0.00                    |
|                 | d and housekeeping supplies  | — 7.         | ·              | 350.00                  |
|                 | dcare and children's education costs   | 8.           | \$             | 0.00                    |
| _               | hing, laundry, and dry cleaning  | 9.           | ·              | 30.00                   |
|                 | sonal care products and services   | 10.          | ·              | 25.00                   |
|                 | ical and dental expenses   | 11.          | · : ————       | 45.00                   |
|                 | sportation. Include gas, maintenance, bus or train fare.                                       | 11.          | Ψ              | 43.00                   |
|                 | not include car payments.  | 12.          | \$             | 204.00                  |
|                 | ertainment, clubs, recreation, newspapers, magazines, and books                                | 13.          | \$             | 0.00                    |
|                 | ritable contributions and religious donations  | 14.          | \$             | 0.00                    |
| 5. <b>Ins</b> ı | _  |              |                | 0.00                    |
|                 | ot include insurance deducted from your pay or included in lines 4 or 20.                      |              |                |                         |
| 15a.            | Life insurance   | 15a.         | \$             | 0.00                    |
| 15b.            | Health insurance   | 15b.         | \$             | 0.00                    |
| 15c.            | Vehicle insurance  | 15c.         | \$             | 193.00                  |
| 15d.            | Other insurance. Specify:  | 15d.         | \$             | 0.00                    |
|                 | es. Do not include taxes deducted from your pay or included in lines 4 or 20.                  |              | · —            |                         |
| Spe             |  | 16.          | \$             | 0.00                    |
| 7. Inst         | allment or lease payments:   |              |                |                         |
| 17a.            | Car payments for Vehicle 1   | 17a.         | \$             | 0.00                    |
| 17b.            | Car payments for Vehicle 2   | 17b.         | \$             | 0.00                    |
| 17c.            | Other. Specify:  | 17c.         | \$             | 0.00                    |
| 17d.            | Other. Specify:  | 17d.         | \$             | 0.00                    |
| 3. You          | r payments of alimony, maintenance, and support that you did not report as                     |              |                |                         |
|                 | ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).                   | 18.          | · -            | 0.00                    |
| 9. <b>Oth</b>   | er payments you make to support others who do not live with you.                               |              | \$             | 0.00                    |
| Spe             |  | 19.          |                |                         |
|                 | er real property expenses not included in lines 4 or 5 of this form or on Sche                 |              |                |                         |
|                 | Mortgages on other property  | 20a.         |                | 0.00                    |
| 20b.            | Real estate taxes  | 20b.         | ·              | 0.00                    |
|                 | Property, homeowner's, or renter's insurance   | 20c.         | \$             | 0.00                    |
| 20d.            | Maintenance, repair, and upkeep expenses   | 20d.         | \$             | 0.00                    |
| 20e.            | Homeowner's association or condominium dues  | 20e.         | \$             | 0.00                    |
| 1. <b>O</b> th  | er: Specify:   | 21.          | +\$            | 0.00                    |
| 0 0=:           |  |              |                |                         |
|                 | culate your monthly expenses   |              | •              | 4 570 00                |
|                 | Add lines 4 through 21.  |              | \$             | 1,572.00                |
|                 | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2                |              | \$             |                         |
| 22c.            | Add line 22a and 22b. The result is your monthly expenses.                                     |              | \$             | 1,572.00                |
| 3 Cald          | culate your monthly net income.  |              |                |                         |
|                 | Copy line 12 (your combined monthly income) from Schedule I.                                   | 23a.         | \$             | 1,917.11                |
|                 | Copy your monthly expenses from line 22c above.  | 23a.<br>23b. | ·              | 1,572.00                |
| 230.            | Copy your monthly expenses from the 220 above.   | ۷۵۵.         |                | 1,372.00                |
| 230             | Subtract your monthly expenses from your monthly income.                                       |              |                |                         |
| 200.            | The result is your <i>monthly net income</i> .   | 23c.         | \$             | 345.11                  |
|                 |  |              |                |                         |
| 24. <b>Do</b> y | ou expect an increase or decrease in your expenses within the year after yo                    | ou file this | form?          |                         |
| For e           | xample, do you expect to finish paying for your car loan within the year or do you expect your |              |                | e or decrease because o |
| modi            | fication to the terms of your mortgage?  |              |                |                         |
|                 | lo   |              |                |                         |
| Пγ              | es Explain here:   |              |                |                         |

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| Fill in this info               | ormation to identify your   | case:                     |                             |                            |  |
|---------------------------------|-----------------------------|---------------------------|-----------------------------|----------------------------|--|
| Debtor 1                        | Susan Elizabeth             |                           |                             |                            |  |
|                                 | First Name                  | Middle Name               | Last Name                   |                            |  |
| Debtor 2<br>(Spouse if, filing) | First Name                  | Middle Name               | Last Name                   |                            |  |
| (Spouse II, IIIIIIg)            | First Name                  | wilddie Name              | Last Name                   |                            |  |
| United States I                 | Bankruptcy Court for the:   | NORTHERN DISTRICT         | T OF ILLINOIS               |                            |  |
| Case number                     |                             |                           |                             |                            |  |
| (if known)                      |                             |                           |                             |                            | ☐ Check if this is an                                      |
|                                 |                             |                           |                             |                            | amended filing   |
|                                 |                             |                           |                             |                            |  |
|                                 |                             |                           |                             |                            |  |
| Official Fo                     | rm 106Dec                   |                           |                             |                            |  |
| Declara                         | ation About a               | an Individual             | Debtor's Sc                 | hedules                    | 12/15  |
|                                 |                             |                           |                             |                            | 1210   |
| f two married                   | people are filing together  | r, both are equally respo | onsible for supplying cor   | rect information.          |  |
|                                 |                             |                           |                             |                            | <u>.</u>   |
|                                 |                             |                           |                             |                            | nent, concealing property, or or imprisonment for up to 20 |
|                                 | . 18 U.S.C. §§ 152, 1341, 1 |                           | Krupicy case can result i   | in filles up to \$250,000, | or imprisonment for up to 20                               |
|                                 |                             | •                         |                             |                            |  |
|                                 |                             |                           |                             |                            |  |
| Si                              | ign Below                   |                           |                             |                            |  |
|                                 |                             |                           |                             |                            |  |
| Did you բ                       | pay or agree to pay some    | one who is NOT an attor   | rney to help you fill out b | pankruptcy forms?          |  |
|                                 |                             |                           |                             |                            |  |
| ■ No                            |                             |                           |                             |                            |  |
| ☐ Yes.                          | Name of person              |                           |                             |                            | uptcy Petition Preparer's Notice,                          |
|                                 |                             |                           |                             | Declaration, a             | and Signature (Official Form 119)                          |
|                                 |                             |                           |                             |                            |  |
| Under per                       | nalty of perjury, I declare | that I have read the sun  | nmary and schedules file    | d with this declaration    | and  |
| that they                       | are true and correct.       |                           | •                           |                            |  |
| Y lel Si                        | usan Elizabeth Thomp        | son                       | X                           |                            |  |
|                                 | ın Elizabeth Thompsor       |                           | Signature of                | Debtor 2                   |  |
|                                 | ture of Debtor 1            |                           | J.ga.a. 0 01                |                            |  |
| ŭ                               |                             |                           |                             |                            |  |
|                                 |                             |                           | Date                        |                            |  |

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|                  | this inform      | ation to identify your  | r case:   |   |   |   |
|------------------|------------------|---|---|---|---|---|
| Debto            | or 1             | Susan Elizabeth   | Thompson  |   |   |   |
| Dobto            | O                | First Name  | Middle Name   | Last Name   |   |   |
| Debto<br>(Spouse | e if, filing)    | First Name  | Middle Name   | Last Name   |   |   |
| United           | d States Ban     | kruptcy Court for the:  | NORTHERN DISTRICT (   | OF ILLINOIS   |   |   |
| Case             | number           |   |   |   |   |   |
| (if know         |                  |   |   |   | _   | Check if this is an amended filing                    |
| O ((;            |                  | 407   |   |   |   |   |
|                  | cial For         |   | Affaira far Individ   | duals Eiling for E                                    | Pankruntov  | 414   |
|                  |                  |   | Affairs for Individ   |   |   | 4/1   |
|                  |                  |   |   |   | equally responsible for sug<br>y additional pages, write yo |   |
|                  |                  | ). Answer every ques  |   |   | , , , , .   |   |
| Part 1           | Give De          | etails About Your Ma  | rital Status and Where You  | Lived Before  |   |   |
|                  |                  | current marital statu   |   |   |   |   |
|                  | _                | ourrent martar stata  | <b>.</b>  |   |   |   |
|                  | ■ Married        |   |   |   |   |   |
|                  | Not marr         | ied   |   |   |   |   |
| 2. D             | uring the la     | st 3 years, have you  | lived anywhere other than   | where you live now?                                   |   |   |
|                  | No               |   |   |   |   |   |
|                  | Yes. List        | all of the places you li                                      | ived in the last 3 years. Do no   | ot include where you live nov                         | ٧.  |   |
| ľ                | Debtor 1 Pri     | or Address:   | Dates Debtor 1 lived there  | Debtor 2 Prior Ad                                     | ddress:   | Dates Debtor 2<br>lived there                         |
|                  |                  |   |   |   | nity property state or territor                             |   |
| states           | and territorie   | es include Arizona, Ca  | lifornia, Idaho, Louisiana, Ne  | vada, New Mexico, Puerto R                            | ico, Texas, Washington and V                                | Nisconsin.)   |
|                  | No               |   |   |   |   |   |
|                  | Yes. Mal         | ke sure you fill out Sch                                      | nedule H: Your Codebtors (O   | fficial Form 106H).                                   |   |   |
| Part 2           | Explain          | the Sources of You  | r Income  |   |   |   |
|                  |                  |   |   |   |   |   |
| F                | ill in the total | amount of income you  | nployment or from operating u received from all jobs and a have income that you received. | all businesses, including part                        |   | endar years?  |
|                  | ] No             |   |   |   |   |   |
| <br>             |                  |   |   |   |   |   |
| _                | Yes. Fill        | in the details.   |   |   |   |   |
| _                | Yes. Fill        | in the details.   | Dobtor 4  |   | Dobton 2  |   |
| _                | Yes. Fill        | in the details.   | Debtor 1  | Gross income  | Debtor 2  | Gross income  |
| _                | Yes. Fill        | in the details.   | Debtor 1 Sources of income Check all that apply.  | Gross income<br>(before deductions and<br>exclusions) | Debtor 2 Sources of income Check all that apply.            | Gross income<br>(before deductions<br>and exclusions) |
| From             | January 1 c      | in the details.<br>of current year until<br>I for bankruptcy: | Sources of income   | (before deductions and                                | Sources of income   | (before deductions                                    |

Official Form 107

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Case number (if known)

Debtor 1 Susan Elizabeth Thompson

Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: ☐ Wages, commissions, \$29,218.00 ☐ Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips Operating a business ☐ Operating a business For the calendar year before that: \$26,343.00 ■ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$-40,912.00 ☐ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year: \$-1,370.00 ☐ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year: \$-2,211.00 □ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business Operating a business \$43,586.00 □ Wages, commissions, Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year: \$48,439.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2013) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business □ Wages, commissions, \$-2,828.00 ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business

#### Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

П No

Yes. Fill in the details.

| Debtor 1<br>Sources of income<br>Describe below. | Gross income from each source (before deductions and exclusions) | Debtor 2 Sources of income Describe below. | Gross income<br>(before deductions<br>and exclusions) |
|--|--|--|---|
| <b></b>  | ****   |  |   |

From January 1 of current year until Side Jobs the date you filed for bankruptcy:

\$100.00

Official Form 107

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|  |                         |                                       |               | Dahtan 4   |  | Dahtan 0                                     |   |   |  |
|--|-------------------------|---------------------------------------|---------------|--|--|--|---|---|--|
|  |                         |                                       |               | Debtor 1<br>Sources of income<br>Describe below.   | Gross income from each source (before deductions and exclusions)                           | Debtor 2<br>Sources of inc<br>Describe below |   | Gross income<br>(before deductions<br>and exclusions) |  |
|  |                         | dar year be<br>December               |               | Line 17 Loss   | \$-3,698.00  |  |   |   |  |
|  |                         |                                       |               | Pension Income   | \$11,765.00  |  |   |   |  |
|  | the calen<br>nuary 1 to | dar year:<br>December                 | 31, 2015 )    | Line 17 loss   | \$-4,082.00  |  |   |   |  |
|  |                         |                                       |               | Capital Loss   | \$-48.00   |  |   |   |  |
|  | the calen<br>nuary 1 to | dar year:<br>December                 | 31, 2014 )    | IRA Distribution   | \$7,778.00   |  |   |   |  |
|  |                         |                                       |               | Line 17 Loss   | \$-14,114.00   |  |   |   |  |
|  | the calen<br>nuary 1 to | dar year:<br>December                 | 31, 2013 )    | Retirement Income  | \$31,753.00  |  |   |   |  |
|  |                         |                                       |               | Line 17 Loss   | \$-3,852.00  |  |   |   |  |
|  | 1.0                     | . O(-! D-                             |               | Mada Dafara Vara Ellad for   | Dl.  |  |   |   |  |
| Par  | <u> </u>                |                                       |               | Made Before You Filed for  |  |  |   |   |  |
| 6.   | Are eithe  No.          | Neither D                             | ebtor 1 nor I | 2's debts primarily consume<br>Debtor 2 has primarily cons<br>a personal, family, or househo | umer debts. Consumer debi  | 's are defined in 11                         | U.S.C. § 10                                   | 1(8) as "incurred by an                               |  |
|  |                         | During the                            | 90 days befo  | ore you filed for bankruptcy, o  | lid you pay any creditor a tota  | al of \$6,425* or mo                         | re?   |   |  |
|  |                         | □ No.                                 | Go to line    | 7.   |  |  |   |   |  |
|  |                         | □ <sub>Yes</sub>                      | paid that ci  |  | nid a total of \$6,425* or more<br>nts for domestic support obliq<br>this bankruptcy case. |  |   |   |  |
|  |                         | * Subject                             |               |  | rs after that for cases filed on   | or after the date of                         | of adjustment                                 |   |  |
|  | ■ Yes.                  |                                       |               | or both have primarily consore you filed for bankruptcy, o                                   | umer debts.<br>lid you pay any creditor a tota   | al of \$600 or more?                         | ?   |   |  |
|  |                         | □ No.                                 | Go to line    | 7.   |  |  |   |   |  |
| Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payment attorney for this bankruptcy case. |                         |                                       |               |  |  |  |   |   |  |
|  | Creditor                | 's Name an                            | d Address     | Dates of paym  | ent Total amount paid  | Amount you still owe                         | Was this p                                    | payment for   |  |
|  | 17947 C                 | s Warehou<br>Dakwood A<br>g, IL 60438 | Avenue        | 12/2017-2/20 <sup>-</sup>  | 18 \$2,100.00  | \$0.00                                       | ☐ Mortgaç ☐ Car ☐ Credit C ☐ Loan R ☐ Supplie | Card  |  |

Other Ren t

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| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. |                            |                      |                      |                    |                              |  |
|-----|--|----------------------------|----------------------|----------------------|--------------------|------------------------------|--|
|     |  |                            |                      |                      |                    |                              |  |
|     | Yes. List all payments to an insider.  |                            |                      |                      |                    |                              |  |
|     | Insider's Name and Address   | Dates of payment           | Total amount paid    | Amount you still owe | Reason for         | this payment                 |  |
| 8.  | Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos  |                            | ments or transfer a  | any property on a    | ccount of a d      | ebt that benefited an        |  |
|     | <ul><li>No</li><li>☐ Yes. List all payments to an insider</li></ul>  |                            |                      |                      |                    |                              |  |
|     | , , , , , , , , , , , , , , , , , ,  | D-1(                       | T-(-1                | A                    | D                  | 4.1                          |  |
|     | Insider's Name and Address   | Dates of payment           | Total amount paid    | Amount you still owe | Include cred       | this payment<br>litor's name |  |
| Pai | t 4: Identify Legal Actions, Repossession  | s, and Foreclosures        |                      |                      |                    |                              |  |
| 9.  | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  |                            |                      |                      |                    |                              |  |
|     |  | N. 4                       | •                    |                      | 0                  |                              |  |
|     | Case title Case number   | Nature of the case         | Court or agency      |                      | Status of th       | ne case                      |  |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.   |                            |                      |                      |                    |                              |  |
|     | ■ No. Go to line 11.  ✓ Yes. Fill in the information below.  |                            |                      |                      |                    |                              |  |
|     |  | B " ( B )                  |                      |                      |                    | V. I. (4)                    |  |
|     | Creditor Name and Address  | Describe the Property      |                      | Date                 |                    | Value of the<br>property     |  |
|     |  | Explain what happened      | 1                    |                      |                    |                              |  |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  ■ No □ Yes. Fill in the details.  |                            | luding a bank or fi  | nancial institution  | , set off any a    | amounts from your            |  |
|     | Creditor Name and Address  | Describe the action the    | creditor took        | Date                 | action was         | Amount                       |  |
|     |  |                            |                      | taker                |                    | 7                            |  |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at  |                            | erty in the possess  | sion of an assigne   | e for the bene     | efit of creditors, a         |  |
|     | ☐ Yes  |                            |                      |                      |                    |                              |  |
| Pai | t 5: List Certain Gifts and Contributions  |                            |                      |                      |                    |                              |  |
| 13. | Within 2 years before you filed for bankrup  No  | tcy, did you give any gift | s with a total value | of more than \$60    | 0 per person       | ?                            |  |
|     | Yes. Fill in the details for each gift.  |                            |                      |                      |                    |                              |  |
|     | Gifts with a total value of more than \$600 per person   | Describe the gifts         |                      | Dates<br>the g       | s you gave<br>ifts | Value                        |  |
|     | Person to Whom You Gave the Gift and Address:  |                            |                      |                      |                    |                              |  |

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Case number (if known) Debtor 1 Susan Elizabeth Thompson 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Value of property Describe the property you lost and Describe any insurance coverage for the loss Date of your how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You **Attorney Fees Upright Law LLC** 2/2018 \$115.00 **79 West Monroe** Fifith Floor Chicago, IL 60603 dgallagher@uprightlaw.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details.

Address

Description and value of

property transferred

Person Who Received Transfer

Person's relationship to you

Date transfer was

made

Describe any property or

paid in exchange

payments received or debts

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Debtor 1 Susan Elizabeth Thompson

| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  |  |                               |   |   |  |  |  |
|-----|--|--|-------------------------------|---|---|--|--|--|
|     | Yes. Fill in the details.  |  |                               |   |   |  |  |  |
|     | Name of trust  | Description and  | value of the property to      | ransferred  | Date Transfer was made                        |  |  |  |
| Pa  | rt 8: List of Certain Financial Accounts, Ins  | struments, Safe Deposi   | t Boxes, and Storage          | Units   |   |  |  |  |
| 20. | Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated to the same cooperative of the sam | or other financial accou   | nts; certificates of dep      | •   |   |  |  |  |
|     | No   |  |                               |   |   |  |  |  |
|     | Yes. Fill in the details.  |  |                               |   |   |  |  |  |
|     | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)   | Last 4 digits of account number  | Type of account or instrument | Date account was<br>closed, sold,<br>moved, or<br>transferred | Last balance<br>before closing or<br>transfer |  |  |  |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables?  | year before you filed fo   | r bankruptcy, any safe        | deposit box or other depo                                     | sitory for securities,                        |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |                               |   |   |  |  |  |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)  | Who else had acc<br>Address (Number, State and ZIP Code)               |                               | ibe the contents  | Do you still have it?                         |  |  |  |
| 22. | Have you stored property in a storage unit of  | or place other than you  | r home within 1 year b        | efore you filed for bankrup                                   | tcy?  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |                               |   |   |  |  |  |
|     | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)   | Who else has or<br>to it?<br>Address (Number, S<br>State and ZIP Code) |                               | ibe the contents  | Do you still have it?                         |  |  |  |
| Pai | rt 9: Identify Property You Hold or Control  | for Someone Else   |                               |   |   |  |  |  |
| 23. | Do you hold or control any property that so for someone.   | meone else owns? Incl  | ude any property you          | borrowed from, are storing                                    | for, or hold in trust                         |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |                               |   |   |  |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the pro<br>(Number, Street, City, 5<br>Code)                  |                               | ibe the property  | Value   |  |  |  |
| Pa  | rt 10: Give Details About Environmental Info   | ormation   |                               |   |   |  |  |  |
| For | the purpose of Part 10, the following definition   | ons apply:   |                               |   |   |  |  |  |
|     | Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these   | ne air, land, soil, surfac   | e water, groundwater,         |   |   |  |  |  |
|     | Site means any location, facility, or property to own, operate, or utilize it, including dispo   | as defined under any   |                               | nether you now own, opera                                     | te, or utilize it or used                     |  |  |  |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

hazardous material, pollutant, contaminant, or similar term.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

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Debtor 1 Susan Elizabeth Thompson

| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental la |   |   |  |                    |  |  |  |  |  |
|--|---|---|--|--------------------|--|--|--|--|--|
|  | ■ No □ Yes. Fill in the details.  |   |  |                    |  |  |  |  |  |
|  | Name of site Address (Number, Street, City, State and ZIP Code)                         | Governmental unit Address (Number, Street, City, State and ZIP Code)    | Environmental law, if you know it                                  | Date of notice     |  |  |  |  |  |
| 25.  | Have you notified any governmental unit of  | any release of hazardous material?                                      |  |                    |  |  |  |  |  |
|  | ■ No □ Yes. Fill in the details.  | · No  |  |                    |  |  |  |  |  |
|  | Name of site<br>Address (Number, Street, City, State and ZIP Code)                      | Governmental unit Address (Number, Street, City, State and ZIP Code)    | Environmental law, if you know it                                  | Date of notice     |  |  |  |  |  |
| 26.  | Have you been a party in any judicial or adn  | ninistrative proceeding under any envi                                  | ronmental law? Include settlements a                               | nd orders.         |  |  |  |  |  |
|  | ■ No □ Yes. Fill in the details.  |   |  |                    |  |  |  |  |  |
|  | Case Title<br>Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case   | Status of the case |  |  |  |  |  |
| Par  | 11: Give Details About Your Business or   | Connections to Any Business   |  |                    |  |  |  |  |  |
| 27.  | Within 4 years before you filed for bankrupt  | cy, did you own a business or have an                                   | y of the following connections to any                              | business?          |  |  |  |  |  |
|  | A sole proprietor or self-employed i  | n a trade, profession, or other activity,                               | either full-time or part-time                                      |                    |  |  |  |  |  |
|  | ☐ A member of a limited liability comp  | pany (LLC) or limited liability partnershi                              | p (LLP)  |                    |  |  |  |  |  |
|  | ☐ A partner in a partnership  |   |  |                    |  |  |  |  |  |
|  | ☐ An officer, director, or managing ex  | ecutive of a corporation  |  |                    |  |  |  |  |  |
|  | ☐ An owner of at least 5% of the votin  | g or equity securities of a corporation                                 |  |                    |  |  |  |  |  |
|  | ■ No. None of the above applies. Go to F  | Part 12.  |  |                    |  |  |  |  |  |
|  | Yes. Check all that apply above and fill  | in the details below for each business                                  | i.   |                    |  |  |  |  |  |
|  | Business Name<br>Address  | Describe the nature of the business                                     | Employer Identification number<br>Do not include Social Security r |                    |  |  |  |  |  |
|  | (Number, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper  | Dates business existed   |                    |  |  |  |  |  |
|  | Susan Elizabeth Thompson<br>17947 Oakwood Avenue  | Indoor billboards   | EIN: 9760  |                    |  |  |  |  |  |
|  | Lansing, IL 60438   |   | From-To 3/2016 to present  |                    |  |  |  |  |  |
| 28.  | Within 2 years before you filed for bankrupt institutions, creditors, or other parties. | cy, did you give a financial statement t                                | o anyone about your business? Inclu                                | de all financial   |  |  |  |  |  |
|  | ■ No  |   |  |                    |  |  |  |  |  |
|  | Yes. Fill in the details below.   |   |  |                    |  |  |  |  |  |
|  | Name Address (Number, Street, City, State and ZIP Code)                                 | Date Issued   |  |                    |  |  |  |  |  |

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| re true and correct. I understand that m          | t of Financial Affairs and any attachments, and I declare under penalty of penalty of penalty of a false statement, concealing property, or obtaining money or property sup to \$250,000, or imprisonment for up to 20 years, or both. |           |
|---|--|-----------|
| /s/ Susan Elizabeth Thompson                      |  |           |
| Susan Elizabeth Thompson<br>Signature of Debtor 1 | Signature of Debtor 2  |           |
| Date March 16, 2018                               | Date   |           |
| Did you attach additional pages to Your           | Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Fo  | orm 107)? |
| No  |  |           |
|   |  |           |

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

### (Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$\frac{115.00}{}\$ toward the flat fee, leaving a balance due of \$\frac{3,885.00}{}; and \$\frac{0.00}{}\$ for expenses,

leaving a balance due for the filing fee of \$0.00.

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: March 16, 2018                    | it to appear in court to object. |  |
|---|----------------------------------|--|
| Signed:                                 |                                  |  |
| /s/ Susan Elizabeth Thompson            | /s/ David Gallagher              |  |
| Susan Elizabeth Thompson                | David Gallagher                  |  |
|   | Attorney for the Debtor(s)       |  |
| Debtor(s)                               |                                  |  |
| Do not sign this agreement if the amour | nts are blank.                   |  |

**Local Bankruptcy Form 23c** 

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B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

| In 1 | e Susan Elizabeth Thompson   |   | Case No.                                   |                           |                 |
|------|--|---|--|---------------------------|-----------------|
|      | <u> </u>   | Debtor(s)   | Chapter                                    | 13                        |                 |
|      | DISCLOSURE OF COMPENSAT  | TION OF ATTOR   | NEY FOR DE                                 | EBTOR(S)                  |                 |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in  | e petition in bankruptcy,                             | or agreed to be paid                       | to me, for services       |                 |
|      | For legal services, I have agreed to accept  |   | \$   | 4,000.00                  |                 |
|      | Prior to the filing of this statement I have received  |   |  | 115.00                    |                 |
|      | Balance Due  |   |  | 3,885.00                  |                 |
| 2.   | \$310.00 of the filing fee has been paid.  |   |  |                           |                 |
| 3.   | The source of the compensation paid to me was:   |   |  |                           |                 |
|      | ✓ Debtor   |   |  |                           |                 |
| 4.   | The source of compensation to be paid to me is:  |   |  |                           |                 |
|      | ✓ Debtor   |   |  |                           |                 |
| 5.   | ✓ I have not agreed to share the above-disclosed compensation  | n with any other person u                             | ınless they are meml                       | bers and associates       | of my law firm. |
|      | ☐ I have agreed to share the above-disclosed compensation will copy of the agreement, together with a list of the names of t   | ith a person or persons w<br>he people sharing in the | ho are not members<br>compensation is atta | or associates of my ched. | law firm. A     |
| 6.   | In return for the above-disclosed fee, I have agreed to render leg   | gal service for all aspects                           | of the bankruptcy c                        | ase, including:           |                 |
|      | <ul> <li>a. Analysis of the debtor's financial situation, and rendering ad</li> <li>b. Preparation and filing of any petition, schedules, statement of</li> <li>c. Representation of the debtor at the meeting of creditors and of</li> <li>d. [Other provisions as needed]</li> </ul> | of affairs and plan which                             | may be required;                           | -                         | ıkruptcy;       |
| 7.   | By agreement with the debtor(s), the above-disclosed fee does n  | not include the following                             | service:                                   |                           |                 |
|      | CER  | TIFICATION  |  |                           |                 |
| this | I certify that the foregoing is a complete statement of any agreement bankruptcy proceeding.   | ment or arrangement for                               | payment to me for re                       | epresentation of the      | debtor(s) in    |
|      | March 16, 2018   | /s/ David Gallaghe                                    | er   |                           |                 |
| -    | Date   | David Gallagher                                       |  |                           |                 |
|      |  | Signature of Attorney Upright Law LLC                 | ,  |                           |                 |
|      |  | 79 West Monroe  |  |                           |                 |
|      |  | Fifith Floor<br>Chicago, IL 60603                     |  |                           |                 |
|      |  | 312-546-4264 Fax                                      |  |                           |                 |
|      |  | dgallagher@uprig                                      | htlaw.com                                  |                           |                 |
|      |  | Name of law firm                                      |  |                           |                 |

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$115.00 toward the flat fee, leaving a balance due of \$3,885.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 5 1 8
Signed: Susan Elizabeth Thompson

David Gallagher

Attorney for the Debtor(s)

Debtor(s)

Do not sign this agreement if the amounts are blank.

**Local Bankruptcy Form 23c** 

## **United States Bankruptcy Court**Northern District of Illinois

| In re | Susan Elizabeth Thompson  |   | Case No.    |    |
|-------|---|---|-------------|----|
|       | •   | Debtor(s)   | Chapter     | 13 |
|       | VERIFICATION OF CREDITOR MATRIX   |   |             |    |
|       |   | Number of C   | reditors: _ | 29 |
|       | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. |   |             |    |
| Date: | March 16, 2018  | /s/ Susan Elizabeth Thompson Susan Elizabeth Thompson Signature of Debtor |             |    |

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Cap1/dbarn
Capital One Retail Srvs/Attn: Bankruptcy
Po Box 30258
Salt Lake City, UT 84130

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chase Card Services Po Box 15298 Wilmington, DE 19850

Citibank / Sears Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179

Citibank/Best Buy Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 St. Louis, MO 63179 Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179

Comenity Bank/Avenue Po Box 182125 Columbus, OH 43218

Comenity Bank/Victoria Secret Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Discover Personal Loan Attn: Bankruptcy Po Box 30954 Salt Lake City, UT 84130

Huntington Bank Attn: Bankruptcy P.O. Box 182519 Columbus, OH 43218

Huntington Natl Bk Po Box 1558 Columbus, OH 43216

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Prosper Marketplace Inc Po Box 396081 San Francisco, CA 94139

Syncb/PLCC Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/zulily Po Box 965017 Orlando, FL 32896 Synchrony Bank Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

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Synchrony Bank/ HH Gregg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/ JC Penneys Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Gap Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Gap Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Old Navy Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Sams Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Select Comfort Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 US Bank/Rms CC 4325 17th Ave S Fargo, ND 58125